

US Schedule D

Capital Gain or Loss Transactions Worksheet

2010

* Check if 28% rate gain or (loss)

(a) Description of property	(b) Date acquired	(c) Date sold	(d) Sales price	(e) Cost or basis	T S J	*	(f) Gain or loss	S / L
100 CHAPMAN	07/01/1983	03/23/2010	23789. 23789.	12000. 12000.	T		11789. 11789.	L

PRINTED 11/16/2011

STEVEN A STERLING
 PAGE S
 3717 MISTY MEADOW
 WHARTON NJ 07885-

	Taxpayer	Spouse
SSN	251-02-0752	252-02-0752
Birth	09/21/1941	02/11/1951
Death		
Day Phone	973-555-1212	
Evening		
Cell or Fax		
PIN	12345	12345

Email _____
 Taxpayer Occupation RETIRED Spouse Occupation HOUSEWIFE
 Filing Status MARRIED FILING JOINT

<u>SAMANTHA</u>	<u>SUMMERS</u>	<u>01/13/1949</u>	<u>253-02-0752</u>	<u>SISTER</u>	<u>12</u>	<u>1</u>
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

Preparer ID: _____ Preparation Fee: _____ Date: _____
 Preparer: _____

Preparer's Use:	1 _____	4 _____	Time in
	2 _____	5 _____	return
	3 _____	6 _____	min.

Recap of 2010 Income Tax Return

Earned Income		Federal Tax	2,243.
Federal AGI.....	57,162.	Withholding	3,444.
Taxable Income.....	32,612.	Refund/(Due).....	1,201.
EIC		Tax Bracket	15.0 %

State	NJ	_____	_____	_____
Tax	263.	_____	_____	_____
Withholding	_____	_____	_____	_____
Refund/Due.....	(213.)	_____	_____	_____
State	_____	_____	_____	_____
Tax	_____	_____	_____	_____
Withholding	_____	_____	_____	_____
Refund/Due.....	_____	_____	_____	_____

	Maximum RAL	Partial RAL	2 week check	2 week deposit
Qualifying refund				
Fees				
Net refund				
Fast check				
2 week check.....				
State check				
Check one				

Name: STEVEN A & PAGE S STERLING

SSN: 251-02-0752

Interest. List all interest on Schedule B, regardless of the amount.

Unemployment and/or state tax refund. Fill out 1099G worksheet

Additional Earned Income	Taxpayer	Spouse	Total
Scholarship income - no W2			
Household employee income - no W2			
Social Security/Railroad Tier 1 Benefits	Taxpayer	Spouse	Total
Social Security received this year	15,972.		
Railroad tier 1 received this year			
Total	15,972.		15,972.
Medicare to Schedule A	1,967.		
Federal tax withheld	550.		

Married Filing Separately

If the filing status is married filing separately and the taxpayer and spouse lived together at any time during the year, up to 85% of social security and railroad benefits received are taxable. See Main Information Sheet, filing status 3

All others

Modified adjusted gross income for this computation consists of AGI (without social security or railroad benefits) + Form 8815, line 14, + Form 8839, line 30 + Form 2555 (EZ) exclusions + student loan interest adjustment 44,202.

+ tax-exempt interest: _____ and excluded income from American Samoa (Form 4563) or

Puerto Rico: _____ + 50% of the benefits received: 7,986. **52,188.**

If the modified AGI is less than \$25,001 (\$32,001 married filing jointly), none of the Social Security and RR Benefits are taxable.

If the modified AGI is between \$25,000 and \$34,000 (\$32,000 and \$44,000 married filing jointly), 50% of the benefits received is taxable

If the modified AGI is greater than \$34,000 (\$44,000 married filing jointly):

85% of the social security and railroad benefits received is taxable	A	13,576.	
Modified AGI		52,188.	
\$34,000 (\$44,000)		44,000.	
Subtract.....		8,188.	
	X 85%=	6,960.	
Minimum 50% of the benefits received or \$4,500 (\$6,000 married filing jointly)		6,000.	
Add	B	12,960.	
Taxable social security and railroad retirement tier 1. Minimum of A or B			12,960.

Lump Sum Payment of Social Security and Railroad Tier 1 Benefits

	Taxpayer	Spouse	Total
Gross amount received attributable to 2010			
Using the above modified AGI, this is the taxable amount of the 2010 benefit			
Amounts taxable from previous years			
Taxable benefits using the lump-sum election method			

Label (See instructions) Use the IRS label. Otherwise, please print or type. For the year Jan. 1-Dec. 31, 2010, or other tax year beginning ,2010, ending ,20 OMB No. 1545-0074 Name Spouse's Name (if Joint Return) Home Address City, State, and ZIP Code STEVEN A STERLING PAGE S STERLING 3717 MISTY MEADOW WHARTON NJ 07885- Your social security number 251-02-0752 Spouse's social security no. 252-02-0752 You must enter your SSN(s) above. Checking a box below will not change your tax or refund.

Presidential Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund (see instructions) You Spouse

Filing Status 1 Single 2 Married filing jointly (even if only one had income) 3 Married filing separately. Enter spouse's SSN above and full name here. 4 Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here. 5 Qualifying widow(er) with dependent child (see instructions)

Exemptions 6a Yourself. If someone can claim you as a dependent, do not check box 6a 6b Spouse 6c Dependents: (1) First name Last name (2) Dependent's social security no. (3) Dependent's relationship to you (4) if qualifying child for child tax credit (see inst) Boxes checked on 6a and 6b No. of children on 6c who: lived with you did not live with you due to divorce or separation (see instr.) Dependents on 6c not entered above Add numbers on lines above 3

Income 7 Wages, salaries, tips, etc. Attach Form(s) W-2 7 8a Taxable interest. Attach Schedule B if required 8a 1,990. b Tax-exempt interest. Do not include on line 8a 8b 9a Ordinary dividends. Attach Schedule B if required 9a 163. b Qualified dividends (see instructions) 9b 106. 10 Taxable refunds, credits, or offsets of state and local income taxes (see instructions) 10 11 Alimony received 11 12 Business income or (loss). Attach Schedule C or C-EZ 12 13 Capital gain or (loss). Attach Schedule D if required. If not required, check here 13 11,858. 14 Other gains or (losses). Attach Form 4797 14 15a IRA distributions 15a b Taxable amount (see inst.) 15b 16a Pensions and annuities 16a 30,418. b Taxable amount (see inst.) 16b 30,191. 17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E 17 18 Farm income or (loss). Attach Schedule F 18 19 Unemployment compensation (see instructions) 19 20a Social security benefits 20a 15,972. b Taxable amount (see inst.) 20b 12,960. 21 Other income. List type and amount (see instr.) 21 22 Combine the amounts in the far right column for lines 7 through 21. This is your total income 22 57,162.

Adjusted Gross Income 23 Educator expenses 23 24 Certain business expenses of reservists, performing artists, and fee-basis gov. officials. Attach Form 2106 or 2106-EZ 24 25 Health savings account deduction. Attach Form 8889 25 26 Moving expenses. Attach Form 3903 26 27 One-half of self-employment tax. Attach Schedule SE 27 28 Self-employed SEP, SIMPLE, and qualified plans 28 29 Self-employed health insurance deduction (see instr.) 29 30 Penalty on early withdrawal of savings 30 31a Alimony paid b Recipient's SSN 31a 32 IRA deduction (see instructions) 32 33 Student loan interest deduction (see instructions) 33 34 Tuition and fees. Attach Form 8917 34 35 Domestic production activities deduction. Attach Form 8903 35 36 Add lines 23 through 31a and 32 through 35 36 37 Subtract line 36 from line 22. This is your adjusted gross income 37 57,162.

Tax and Credits	38	Amount from line 37 (adjusted gross income)	38	57,162.
	39a	Check <input checked="" type="checkbox"/> You were born before Jan. 2, 1946, <input type="checkbox"/> Blind. Total boxes checked <input type="checkbox"/> 39a <input type="checkbox"/> 2 if: <input type="checkbox"/> Spouse was born before Jan. 2, 1946, <input checked="" type="checkbox"/> Blind.		
	b	If your spouse itemizes on a separate return or you were a dual-status alien, see instructions and check here 39b <input type="checkbox"/>		
	40	Itemized deductions (from Schedule A) or your standard deduction (see instructions)	40	13,600.
	41	Subtract line 40a from line 38	41	43,562.
	42	Exemptions. Multiply \$3,650 by the number on line 6d	42	10,950.
	43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	32,612.
	44	Tax (see instructions). Check if any tax is from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972	44	2,256.
	45	Alternative minimum tax (see instructions). Attach Form 6251	45	
	46	Add lines 44 and 45	46	2,256.
Other Taxes	47	Foreign tax credit. Attach Form 1116 if required	47	13.
	48	Credit for child and dependent care expenses. Attach Form 2441	48	
	49	Education credits from Form 8863, line 23	49	
	50	Retirement savings contributions credit. Attach Form 8880	50	
	51	Child tax credit (see instructions)	51	
	52	Residential energy credits. Attach Form 5695	52	
	53	Other credits from Form: a <input type="checkbox"/> 3800 b <input type="checkbox"/> 8801 c <input type="checkbox"/>	53	
	54	Add lines 47 through 53. These are your total credits	54	13.
	55	Subtract line 54 from line 46. If line 54 is more than line 46, enter -0-	55	2,243.
	56	Self-employment tax. Attach Schedule SE	56	
57	Unreported social security and Medicare tax from Form: a <input type="checkbox"/> 4137 b <input type="checkbox"/> 8919	57		
58	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	58		
59	a <input type="checkbox"/> Form(s) W-2, box 9 b <input type="checkbox"/> Schedule H c <input type="checkbox"/> Form 5405, line 16	59		
60	Add lines 55 through 59. This is your total tax	60	2,243.	
Payments	61	Federal income tax withheld from Forms W-2 and 1099	61	3,444.
	62	2010 estimated tax payments and amount applied from 2009 return	62	
	63	Making work pay and government retiree credits. Attach Schedule M	63	
	64 a	Earned income credit (EIC) NO	64a	
	b	Nontaxable combat pay election 64b		
	65	Additional child tax credit. Attach Form 8812	65	
	66	American opportunity credit from Form 8863, line 14	66	
	67	First-time homebuyer credit from Form 5405, line 10	67	
	68	Amount paid with request for extension to file (see inst.)	68	
	69	Excess social security and tier 1 RRTA tax withheld (see inst.)	69	
70	Credit for federal tax on fuels. Attach Form 4136	70		
71	Credits from Form: a <input type="checkbox"/> 2439 b <input type="checkbox"/> 8839 c <input type="checkbox"/> 8801 d <input type="checkbox"/> 8885	71		
72	Add lines 61, 62, 63, 64a and 65 through 71. These are your total payments	72	3,444.	
Refund Direct deposit? See instructions and fill in 74b, 74c, and 74d, or Form 8888.	73	If line 72 is more than line 60, subtract line 60 from line 72. This is the amount you overpaid	73	1,201.
	74 a	Amount of line 73 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	74a	1,201.
	b	Routing number <input type="text"/>	c	Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings
d	Account number <input type="text"/>	75	Amount of line 73 you want applied to your 2011 estimated tax	
Amount You Owe	76	Amount you owe. Subtract line 72 from line 60. For details on how to pay, see inst.	76	
	77	Estimated tax penalty (see instructions)	77	

If you have a qualifying child, attach Schedule EIC.

Third Party Designee Do you want to allow another person to discuss this return with the IRS (see instructions)? Yes. Complete the following. No

Designee's name Phone no. Personal identification number (PIN)

Sign Here Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature	Date	Your occupation	Daytime phone number
<input type="text"/>	<input type="text"/>	RETIRED	973-555-1212
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	
<input type="text"/>	<input type="text"/>	HOUSEWIFE	

Paid Preparer's Use Only

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
Firm's name	Firm's EIN			
Firm's address	Phone no.			

SCHEDULE B
(Form 1040A or 1040)

Department of the Treasury
Internal Revenue Service (99)

Interest and Ordinary Dividends

▶ **Attach to Form 1040A or 1040.** ▶ **See Instructions**

OMB No. 1545-0074

2010
Attachment
Sequence No. **08**

Name(s) shown on return: **STEVEN A & PAGE S STERLING**
Your social security number: **251-02-0752**

		Amount
Part I Interest (See instructions and the instructions for Form 1040A, or Form 1040, line 8a.) Note. If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form.	1 List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see instructions and list this interest first. Also, show that buyer's social security number and address ▶ _____ <u>CHAPMAN FEDERAL S AN</u> <u>NEW CITY BANK</u> _____	125. 1,865.
	2 Add the amounts on line 1	1,990.
	3 Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815	
	4 Subtract line 3 from line 2. Enter the result here and on Form 1040A, or Form 1040, line 8a ▶	1,990.
	Note. If line 4 is over \$1,500, you must complete Part III.	
	Amount	
	5 List name of payer ▶ <u>BRIDGEPORT FUND</u> _____ _____ _____ _____ _____	163.
	6 Add the amounts on line 5. Enter the total here and on Form 1040A, or Form 1040, line 9a ▶	163.
	Note. If line 6 is over \$1,500, you must complete Part III.	

		Amount
Part II Ordinary Dividends (See instructions and the instructions for Form 1040A, or Form 1040, line 9a.) Note. If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary dividends shown on that form.	5 List name of payer ▶ <u>BRIDGEPORT FUND</u> _____ _____ _____ _____ _____	163.
	6 Add the amounts on line 5. Enter the total here and on Form 1040A, or Form 1040, line 9a ▶	163.
	Note. If line 6 is over \$1,500, you must complete Part III.	

		Yes	No
Part III Foreign Accounts and Trusts (See instructions)			
You must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; (b) had a foreign account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust.			
7 a	At any time during 2010, did you have an interest in or a signature or other authority over a financial account in a foreign country, such as a bank account, securities account, or other financial account? See instructions for exceptions and filing requirements for Form TD F 90-22.1		X
b	If "Yes," enter the name of the foreign country ▶ _____		
8	During 2010, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If "Yes," you may have to file Form 3520. See instructions		X

**SCHEDULE D
(Form 1040)**

Capital Gains and Losses

OMB No. 1545-0074

2010

Department of the Treasury
Internal Revenue Service (99)

▶ **Attach to Form 1040 or Form 1040NR.** ▶ **See Instructions for Schedule D (Form 1040).**
▶ **Use Schedule D-1 to list additional transactions for lines 1 and 8.**

Attachment
Sequence No. **12**

Name(s) shown on return: **STEVEN A & PAGE S STERLING**
Your social security number: **251-02-0752**

Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less

(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold (Mo., day, yr.)	(d) Sales price (see instructions)	(e) Cost or other basis (see instructions)	(f) Gain or (loss) Subtract (e) from (d)
1					
2 Enter your short-term totals, if any, from Schedule D-1, line 2			2		
3 Total short-term sales price amounts. Add lines 1 and 2 in column (d)			3		
4 Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824					4
5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1					5
6 Short-term capital loss carryover. Enter the amount, if any, from line 10 of your Capital Loss Carryover Worksheet in the instructions					6 ()
7 Net short-term capital gain or (loss). Combine lines 1 through 6 in column (f)					7

Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year

(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold (Mo., day, yr.)	(d) Sales price (see instructions)	(e) Cost or other basis (see instructions)	(f) Gain or (loss) Subtract (e) from (d)
8 100 CHAPMAN	07/01/1983	03/23/2010	23789.	12000.	11789.
9 Enter your long-term totals, if any, from Schedule D-1, line 9			9		
10 Total long-term sales price amounts. Add lines 8 and 9 in column (d)			10 23789.		
11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824					11
12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1					12
13 Capital gain distributions. See the instructions					13 69.
14 Long-term capital loss carryover. Enter the amount, if any, from line 15 of your Capital Loss Carryover Worksheet in the instructions					14 ()
15 Net long-term capital gain or (loss). Combine lines 8 through 14 in column (f). Then go to Part III on page 2					15 11858.

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule D (Form 1040) 2010

Part III Summary

16 Combine lines 7 and 15 and enter the result 16 11,858.

- If line 16 is a gain, enter the amount from line 16 on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 17 below.
• If line 16 is a loss, skip lines 17 through 20 below. Then go to line 21. Also be sure to complete line 22.
• If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 22.

17 Are lines 15 and 16 both gains?

- [X] Yes. Go to line 18.
[] No. Skip lines 18 through 21, and go to line 22.

18 Enter the amount, if any, from line 7 of the 28% Rate Gain Worksheet in the instructions 18

19 Enter the amount, if any, from line 18 of the Unrecaptured Section 1250 Gain Worksheet in the instructions 19

20 Are lines 18 and 19 both zero or blank?

- [X] Yes. Complete Form 1040 through line 43, or Form 1040NR through line 41. Then complete the Qualified Dividends and Capital Gain Tax Worksheet in the Instructions for Form 1040, line 44 (or in the Instructions for Form 1040NR, line 42). Do not complete lines 21 and 22 below.
[] No. Complete Form 1040 through line 43, or Form 1040NR through line 41. Then complete the Schedule D Tax Worksheet in the instructions. Do not complete lines 21 and 22 below.

21 If line 16 is a loss, enter here and on Form 1040, line 13, or Form 1040NR, line 14, the smaller of:

- The loss on line 16 or 21 ()
• (\$3,000), or if married filing separately, (\$1,500)

Note. When figuring which amount is smaller, treat both amounts as positive numbers.

22 Do you have qualified dividends on Form 1040, line 9b, or Form 1040NR, line 10b?

- [] Yes. Complete Form 1040 through line 43, or Form 1040NR through line 41. Then complete the Qualified Dividends and Capital Gain Tax Worksheet in the Instructions for Form 1040, line 44 (or in the Instructions for Form 1040NR line 42).
[] No. Complete the rest of Form 1040 or Form 1040NR.

US Schedule D

Schedule D Tax Worksheet

2010

Name: **STEVEN A & PAGE S STERLING**

SSN: **251-02-0752**

1	Taxable income from Form 1040, line 43, Form 1040NR, line 40, Form 1040A, line 27, or from the Foreign Earned Income Tax Worksheet			32,612.
2	Qualified dividends from Form 1040, line 9b, Form 1040A, line 9b, or Form 1040NR, line 10b	106.		
3	Line 4g of Form 4952			
4	Line 4e of Form 4952			
5	Subtract line 4 from line 3			
6	Subtract line 5 from line 2. If -0- or less, enter -0-		106.	
7	Smaller of line 15 or line 16 of Schedule D	11,858.		
8	Smaller of line 3 or line 4			
9	Subtract line 8 from line 7. If -0- or less, enter -0-		11,858.	
10	Add lines 6 and 9			11,964.
11	Add lines 18 and 19 of Schedule D			
12	Smaller of line 9 or line 11			
13	Subtract line 12 from line 10. If -0- or less, enter -0-			11,964.
14	Subtract line 13 from line 1. If -0- or less, enter -0-			20,648.
15	Smaller of line 1 or \$68,000 if married filing jointly or qualifying widow(er); \$34,000, if single or married filing separately; \$45,550 if head of household		32,612.	
16	Smaller of line 14 or line 15		20,648.	
17	Subtract line 10 from line 1. If -0- or less, enter -0-	20,648.		
18	Larger of line 16 or line 17			20,648.
19	Subtract line 16 from line 15			11,964.
20	Smaller of line 1 or line 13			
21	Amount from line 19			
22	Subtract line 21 from line 20			
23	Multiply line 22 by 15%			
24	Smaller of line 9 above or Schedule D, line 19			
25	Add lines 10 and 18			
26	Amount from line 1			
27	Subtract line 26 from line 25. If -0- or less, enter -0-			
28	Subtract line 27 from line 24. If -0- or less, enter -0-			
29	Multiply line 28 by 25%			
30	Add lines 18, 19, 22, and 28			
31	Subtract line 30 from line 1			
32	Multiply line 31 by 28%			
33	Tax on line 18 amount			2,256.
34	Add lines 23, 29, 32, and 33			2,256.
35	Tax on line 1 amount			4,056.
36	Tax on all taxable income. Smaller of lines 34 or 35			2,256.

US Estimated Tax Payments Made for the Current Tax Year 2010

Name: STEVEN A & PAGE S STERLING

SSN: 251-02-0752

Federal Estimated Tax Payments

See note below	Date of payment	Amount of payment	Towards 04/15/2010 payment	Towards 06/15/2010 payment	Towards 09/15/2010 payment	Towards 01/15/2011 payment
From last year						
D 04/15 1						
U 06/15 2						
E 09/15 3						
01/15 4						
* Pay date						
Totals						

* Fill in the pay date on Form 2210, page 1.

State Estimated Tax Payments

**The day listed in the date of payment section is the due date for most state estimated tax payments. If your state has different due dates, disregard the date suggested. If payment 1 was paid on or before the date due for payment 1, enter it in payment 1, etc.

* Check the * column if payment 4 was paid before 01/01/2011.

Taxpayer, Joint, or Combined State Return

** Date of Payment

State	Credit from last year	04/15/2010 Amount 1	06/15/2010 Amount 2	09/15/2010 Amount 3	01/15/2011 Amount 4	*	Total	
NJ								
NJ	State and/or local balance due from previous years' returns paid in 2010. Include amounts paid with a 2009 extension paid in 2010							203.
	State and/or local balance due from previous years' returns paid in 2010. Include amounts paid with a 2009 extension paid in 2010							
NJ	Last state estimate payment for 2009 paid in 2010 (due January 15, 2010)							
	Last state estimate payment for 2009 paid in 2010 (due January 15, 2010)							

Spouse Filing Married Separate State Tax Return or Second Full Year Resident State

** Date of Payment

State	Credit from last year	04/15/2010 Amount 1	06/15/2010 Amount 2	09/15/2010 Amount 3	01/15/2011 Amount 4	*	Total

1099-R DETAIL REPORT - 2010

Payer	EIN	T S	Box 7	IRA/SEP Simple	Fed. With.	State With.	Gross	1099R Taxable	Roll/ Exclude	Net	Cost	Cost Bal.
AVERELL PENSION FUND	25-4020752	T	7		1715NJ		18625		E 227	18398	5864	5183
SCRIPPS INVESTMENT P	25-5020752	T	7		1179NJ		11793	11793		11793		
					----		-----	-----	---	-----	-----	-----
					2894		30418	11793	227	30191	5864	5183

Alternative Minimum Tax - Individuals

Department of the Treasury
Internal Revenue Service (99)

▶ See separate instructions.

2010
Attachment
Sequence No. **32**

▶ Attach to Form 1040 or Form 1040NR.

Name(s) shown on Form 1040 or Form 1040NR
STEVEN A & PAGE S STERLING

Your social security no.
251-02-0752

Part I Alternative Minimum Taxable Income (See instructions for how to complete each line.)

1	If filing Schedule A (Form 1040), enter the amount from Form 1040, line 41 and go to line 2. Otherwise, enter the amount from Form 1040, line 38 and go to line 6. (If less than zero, enter as a negative amount.)	1	57,162.
2	Medical and dental. Enter the smaller of Schedule A (Form 1040), line 4, or 2.5% (.025) of Form 1040, line 38. If zero or less, enter -0-	2	
3	Taxes from Schedule A (Form 1040), lines 5, 6 and 8	3	
4	Enter the home mortgage interest adjustment, if any, from line 6 of the worksheet of the instructions	4	
5	Miscellaneous deductions from Schedule A (Form 1040), line 27	5	
6	If filing Schedule L (Form 1040A or 1040), enter as a negative amount the sum of lines 6 and 17 from that schedule	6	()
7	Tax refund from Form 1040, line 10 or line 21	7	()
8	Investment interest expense (difference between regular tax and AMT)	8	
9	Depletion (difference between regular tax and AMT)	9	
10	Net operating loss deduction from Form 1040, line 21. Enter as a positive amount	10	
11	Alternative tax net operating loss deduction	11	()
12	Interest from specified private activity bonds exempt from the regular tax	12	
13	Qualified small business stock (7% of gain excluded under section 1202)	13	
14	Exercise of incentive stock options (excess of AMT income over regular tax income)	14	
15	Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)	15	
16	Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6)	16	
17	Disposition of property (difference between AMT and regular tax gain or loss)	17	
18	Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)	18	
19	Passive activities (difference between AMT and regular tax income or loss)	19	
20	Loss limitations (difference between AMT and regular tax income or loss)	20	
21	Circulation costs (difference between regular tax and AMT)	21	
22	Long-term contracts (difference between AMT and regular tax income)	22	
23	Mining costs (difference between regular tax and AMT)	23	
24	Research and experimental costs (difference between regular tax and AMT)	24	
25	Income from certain installment sales before January 1, 1987	25	()
26	Intangible drilling costs preference	26	
27	Other adjustments, including income-based related adjustments	27	
28	Alternative minimum taxable income. Combine lines 1 through 27. (If married filing separately and line 28 is more than \$219,900, see instructions.)	28	57,162.

Part II Alternative Minimum Tax (AMT)

29	Exemption. (If you were under age 24 at the end of 2010, see the instructions.)														
	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">IF your filing status is...</td> <td style="width: 33%;">AND line 28 is not over...</td> <td style="width: 33%;">THEN enter on line 29...</td> </tr> <tr> <td>Single or head of household</td> <td>\$112,500</td> <td>\$47,450</td> </tr> <tr> <td>Married filing jointly or qualifying widow(er)</td> <td>150,000</td> <td>72,450</td> </tr> <tr> <td>Married filing separately</td> <td>75,000</td> <td>36,225</td> </tr> </table>	IF your filing status is...	AND line 28 is not over...	THEN enter on line 29...	Single or head of household	\$112,500	\$47,450	Married filing jointly or qualifying widow(er)	150,000	72,450	Married filing separately	75,000	36,225	29	72,450.
IF your filing status is...	AND line 28 is not over...	THEN enter on line 29...													
Single or head of household	\$112,500	\$47,450													
Married filing jointly or qualifying widow(er)	150,000	72,450													
Married filing separately	75,000	36,225													
	If line 28 is over the amount shown above for your filing status, see the instructions.														
30	Subtract line 29 from line 28. If more than zero, go to line 31. If zero or less, enter -0- here and on lines 33 and 35 and skip the rest of Part II	30													
31	<ul style="list-style-type: none"> • If you are filing Form 2555 or 2555-EZ, see the instructions for the amount to enter. • If you reported capital gain distributions directly on Form 1040, line 13; you reported qualified dividends on Form 1040, line 9b; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured for the AMT, if necessary), complete Part III on page 2 and enter the amount from line 54 here. • All others: If line 30 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 30 by 26% (.26). Otherwise, multiply line 30 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result. 	31													
32	Alternative minimum tax foreign tax credit (see the instructions)	32	13.												
33	Tentative minimum tax. Subtract line 32 from line 31	33													
34	Tax from Form 1040, line 44 (minus any tax from Form 4972 and any foreign tax credit from Form 1040, line 47). If you used Schedule J to figure your tax, the amount from line 44 of Form 1040 must be refigured without using Schedule J (see the instructions)	34	2,243.												
35	AMT. Subtract line 34 from line 33. If zero or less, enter -0-. Enter here and on Form 1040, line 45	35													

Department of the Treasury
Internal Revenue Service

- ▶ Do not send to the IRS. This is not a tax return.
- ▶ Keep this form for your records. See instructions.

2010

Declaration Control Number (DCN) ▶ 00200752 1

Taxpayer's name STEVEN A STERLING	Social security number 251-02-0752
Spouse's name PAGE S STERLING	Spouse's social security number 252-02-0752

Part I Tax Return Information-Tax Year Ending December 31, 2010 (Whole Dollars Only)	
1 Adjusted gross income (Form 1040, line 38; Form 1040A, line 22; Form 1040EZ, line 4)	1 57,162.
2 Total tax (Form 1040, line 60; Form 1040A, line 37; Form 1040EZ, line 11)	2 2,243.
3 Federal income tax withheld (Form 1040, line 61; Form 1040A, line 38; Form 1040EZ, line 7)	3 3,444.
4 Refund (Form 1040, line 74a; Form 1040A, line 46a; Form 1040EZ, line 12a; Form 1040-SS, Part I, line 12a)	4 1,201.
5 Amount you owe (Form 1040, line 76; Form 1040A, line 48; Form 1040EZ, line 13)	5

Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of perjury, I declare that I have examined a copy of my electronic individual income tax return and accompanying schedules and statements for the tax year ending December 31, 2010, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from my electronic income tax return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgment of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my Federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. I further understand that this authorization may apply to future Federal tax payments that I direct to be debited through the Electronic Federal Tax Payment System (EFTPS). In order for me to initiate future payments, I request that the IRS send me a personal identification number (PIN) to access EFTPS. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for my electronic income tax return and, if applicable my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

I authorize KINNELON LIBRARY TCE to enter or generate my PIN 12345
ERO firm name **Enter five numbers, but do not enter all zeros**
as my signature on my tax year 2010 electronically filed income tax return.

I will enter my PIN as my signature on my tax year 2010 electronically filed income tax return. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature ▶ _____ Date ▶ 10/15/2011

Spouse's PIN: check one box only

I authorize KINNELON LIBRARY TCE to enter or generate my PIN 12345
ERO firm name **Enter five numbers, but do not enter all zeros**
as my signature on my tax year 2010 electronically filed income tax return.

I will enter my PIN as my signature on my tax year 2010 electronically filed income tax return. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ▶ _____ Date ▶ 10/15/2011

Practitioner PIN Method Returns Only-continue below

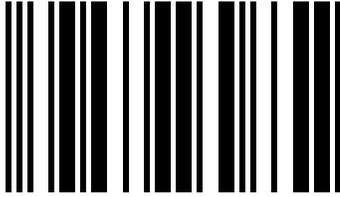
Part III Certification and Authentication-Practitioner PIN Method Only

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 20075298765
do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the tax year 2010 electronically filed income tax return for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and **Publication 1345**, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature ▶ S24051405 KINNELON LIBRARY TCE Date ▶ 10/15/2011

ERO Must Retain This Form - See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So



STATE OF NEW JERSEY INCOME TAX - RESIDENT RETURN

For Privacy Act Notification, See Instructions
For Tax Year Jan. - Dec. 2010 or Other Tax Year

Beginning _____, 2010 ____ Month Ending _____ 200__
On-line Federal Ext. Confirmation # _____

STERLING STEVEN A & PAGE S

3717 MISTY MEADOW

WHARTON

NJ 07885-0000 1439

9006

251020752

Under the penalties of perjury, I declare that I have examined this income tax return and rebate application, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete and that I occupied the rental property for which I am applying for the tenant rebate as my principal residence on October 1, 2010. If prepared by a person other than the taxpayer, this declaration is based on all information of which the preparer has any knowledge.

Pay amount on line 54 in full. Write Social Security # on check or money order and make payable to:
STATE OF NEW JERSEY - TGI
If you have an amount due, enclose your check and NJ-1040-V payment voucher and your return to: N J Division of Taxation, Revenue Processing Center, PO Box 111, Trenton, NJ 08645-0111
If REFUND: N J Division of Taxation, Revenue Processing Center, PO Box 555, Trenton, NJ 08647-0555

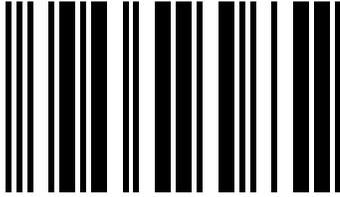
▶ _____ ▶ _____
Your Signature Date Spouse/CU Partner's Signature (If filing jointly, BOTH must sign)

Paid Preparer's Signature

Federal Identification Number

Firm's Name

Federal Employer Identification Number



00000000000000000000

STERLING STEVEN A & PAGE S

001	00	014	0	040	0	SS#	251020752
EXT	0	15a	1990	40a	0	SP#	252020752
FS	2	15b	0	042	0	SS1	253020752
DP	0	016	163	044	22	BY1	1949
006	2	017	0	045	0	SS2	0
007	1	018	11858	046	263	BY2	0
008	1	019	30191	047	0	SS3	0
009	1	020	0	048	50	BY3	0
010	0	021	0	049	0	SS4	0
011	0	022	0	050	0	BY4	0
12a	4	023	0	50b	0	DDI	4
12b	1	024	0	50c	0	AT	0
RSF	000000	025	0	051	0	FOR	0
RST	000000	026	44202	052	0	RN	0
GEF	0	27a	20000	053	0	PID	0
HCa	0	27b	0	054	50	FID	0
HCb	0	27c	20000	055	213		
HCc	0	029	5500	056	0		
HCd	0	030	1483	057	0		
22c	0	031	0	058	0		
VC	1045	032	0	059	0		
CTY	1439	033	0	060	0		
PDR	0	36a	2268	061	0		
DNM	0	36b	0	062	0		
PA	0	36c	0	063	0		
CDV	9354	037	17219	63c	0		
		038	241	064	0		
				065	0		

Name STERLING STEVEN A & PAGE S	Social Security Number 251-02-0752
---	--

RESIDENCY STATUS If you were a New Jersey resident for ONLY part of the taxable year, give the period of New Jersey residency: From _____ To _____
 MONTH DAY YEAR MONTH DAY YEAR

FILING STATUS 1. Single 2. Married/CU Couple, filing joint return 3. Married/CU Partner, filing separate return 4. Head of Household 5. Qualifying Widow(er)/Surviving CU Partner

EXEMPTIONS 6. Regular	2	10. Number of other dependents	0
7. Age 65 or Over	1	11. Dependents attending colleges	0
8. Blind or Disabled	1	12. Totals (Line 12a - Add Lines 6, 7, 8 and 11)	4
9. Number of qualified dependent children	1	(Line 12b - Add Lines 9 and 10)	1

13. Dependent's information from Lines 9 and 10. (ATTACH RIDER IF MORE THAN FOUR)

	LAST NAME, FIRST NAME, MIDDLE INITIAL	SOCIAL SECURITY #	BIRTH YEAR	If the dep. does not have health ins. including NJ Family Care / Medicaid, Medicare, private or other, check the box. (see inst.)
a.	SUMMERS SAMANTHA	253-02-0752	1949	<input type="checkbox"/>
b.				<input type="checkbox"/>
c.				<input type="checkbox"/>
d.				<input type="checkbox"/>

GUBERNATORIAL Do you wish to designate \$1 of your taxes for this fund? Yes No

ELECTIONS FUND If joint return, does your spouse/CU partner wish to designate \$1? Yes No

14. Wages, salaries, tips, and other employee compensation (Enclose W-2)	14	
15a. Taxable interest income (See instructions) (Enclose Fed Sch B if over \$1,500)	15a	1,990.
15b. Tax exempt interest income. DO NOT include on Line 15a	15b	
16. Dividends	16	163.
17. Net profits from business (Enclose copy of Federal Schedule C, Form 1040)	17	
18. Net gains or income from disposition of property (Schedule B, Line 4)	18	11,858.
19. Pensions, Annuities, and IRA Withdrawals (See instructions)	19	30,191.
20. Distributive Share of Partnership Income (See instructions)	20	
21. Net pro rata share of S Corporation Income (See instructions) (Enclose Schedule)	21	
22. Net gain or income from rents, royalties, patents & copyrights (Schedule C, Line 3)	22	
23. Net Gambling Winnings (See Instructions)	23	
24. Alimony and separate maintenance payments received	24	
25. Other (See instructions)	25	
26. Total income (Add Lines 14, 15a, 16 through 25)	26	44,202.
27a. Pension Exclusion (See instructions)	27a	20,000.
27b. Other Retirement Income Exclusion (See Worksheet and instr.)	27b	
27c. Total Exclusion Amount (Add line 27a and Line 27b)	27c	20,000.
28. New Jersey Gross Income (Subtract Line 27c from Line 26) See instructions.	28	24,202.
29. Total Exemption Amount - See instructions (Part Year Residents see instructions.)	29	5,500.
30. Medical Expenses (See Worksheet and instr.)	30	1,483.
31. Alimony and Separate Maintenance Payments	31	
32. Qualified Conservation Contribution	32	
33. Health Enterprise Zone Deduction	33	
34. Total Exemptions and Deductions (Add Lines 29, 30, 31, 32 and 33)	34	6,983.
35. Taxable Income (Subtract Line 34 from Line 28) If zero or less, MAKE NO ENTRY.	35	17,219.
36a. Total Property Taxes Paid	36a	2,268.
36b. Fill in oval if you were a New Jersey homeowner on October 1, 2010	<input type="checkbox"/>	
36c. Property Tax Deduction (See instructions)	36c	
37. NEW JERSEY TAXABLE INCOME (Subtract Line 36c from Line 35) If zero or less, MAKE NO ENTRY.	37	17,219.
38. Tax (From Tax Tables, see instructions)	38	241.
39. THIS LINE IS NOT USED ON COMPUTER GENERATED RETURNS		
40. Credit For Income Taxes Paid to Other Jurisdictions. Enter other jurisdiction code (See instr.)	<input type="checkbox"/>	
41. Balance of Tax (Subtract Line 40 from Line 38)	41	241.
42. Sheltered Workshop Tax Credit	42	
43. Balance of Tax after Credit (Subtract Line 42 from 41)	43	241.
44. Use Tax Due on Out-of-State Purchases (See instructions) If no Use Tax, enter ZERO.	44	22.
45. Penalty for Underpayment of Estimated Tax Check if Form 2210 enclosed. <input type="checkbox"/>	45	
46. Total Tax and Penalty (Add Lines 43, 44 and 45)	46	263.

Name		Social Security Number	
STERLING STEVEN A & PAGE S		251-02-0752	

47	Total New Jersey Income Tax Withheld (Enclose forms W-2 and 1099)	47	
48	Property Tax Credit (See instructions)	48	50.
49	New Jersey Estimated Tax Payments/Credit from 2009 tax return.	49	
50	New Jersey Earned Income Tax Credit (See instructions) (Fill in only one)	50	
Fill in the box if you had the IRS figure your Federal Earned Income Credit. <input type="checkbox"/>			
Fill in the box if you are a CU couple claiming the NJ Earned Income Tax Credit <input type="checkbox"/>			
51	EXCESS New Jersey UI/SF/SWF Withheld (See instr.) (Enclose Form NJ-2450)	51	
52	EXCESS New Jersey Disability Insurance Withheld (See instr.) (Enclose Form NJ-2450)	52	
53	EXCESS New Jersey Family Leave Withheld (See instructions) (Enclose Form NJ-2450)	53	
54	Total Payments/Credits (Add Lines 47 through 53)	54	50.
55	If Line 54 is LESS THAN Line 46, enter AMOUNT YOU OWE.	55	213.
If you owe tax, you may make a donation by entering an amount on Lines 58, 59, 60, 61, 62 and/or 63 and adding this to your payment amount.			
56	If Line 54 is MORE THAN Line 46, enter OVERPAYMENT	56	
Deductions from Overpayment on Line 56 which you elect to credit to:			
57	Your 2011 tax	57	
58	N.J. Endangered Wildlife Fund <input type="checkbox"/> \$10 <input type="checkbox"/> \$20 <input type="checkbox"/> Other	58	
59	N.J. Children's Trust Fund <input type="checkbox"/> \$10 <input type="checkbox"/> \$20 <input type="checkbox"/> Other	59	
60	N.J. Vietnam Veterans' Memorial Fund <input type="checkbox"/> \$10 <input type="checkbox"/> \$20 <input type="checkbox"/> Other	60	
61	N.J. Breast Cancer Research Fund <input type="checkbox"/> \$10 <input type="checkbox"/> \$20 <input type="checkbox"/> Other	61	
62	U.S.S. New Jersey Educational Museum Fund <input type="checkbox"/> \$10 <input type="checkbox"/> \$20 <input type="checkbox"/> Other	62	
63	Other Designated Contribution (See instructions) <input type="checkbox"/> \$10 <input type="checkbox"/> \$20 <input type="checkbox"/> Other <input type="checkbox"/>	63	
64	Total Deductions from Overpayment (Add Lines 57 through 63)	64	
65	REFUND (Amount to be sent to you. Subtract Line 64 from Line 56)	65	

DIRECT DEPOSIT INFORMATION

`1' for Refund only and `4' for no.

Check Routing Number

Account Number

Type of account (`C' for Checking, `S' for Savings)

Fill in check box if refund is going to an account outside the US

I authorize the Division of Taxation to discuss my return and enclosures with my preparer

Name(s) as shown on Form NJ-1040 STERLING STEVEN A & PAGE S	Your Social Security Number 251-02-0752
--	--

Schedule A CREDIT FOR INCOME OR WAGE TAXES PAID TO OTHER JURISDICTION If you are claiming a credit for income taxes paid to more than one jurisdiction, a separate Schedule A must be enclosed for each. See instructions.

A COPY OF OTHER STATE OR POLITICAL SUBDIVISION TAX RETURN MUST BE RETAINED WITH YOUR RECORDS

1. Income actually taxed by other jurisdiction during tax year (indicate name _____) (DO NOT combine the same income taxed by more than one jurisdiction) (The amount on Line 1 cannot exceed the amount shown on Line 2)	1.	
2. Income subject to tax by New Jersey (From Line 28, Form NJ-1040)	2.	
3. Maximum Allowable Credit Percentage 1 _____ (Divide Line 2 into Line 1) 2 _____	3.	%
IF YOU ARE NOT ELIGIBLE FOR A PROP. TAX BENEFIT ONLY COMPLETE COL. B.	COLUMN A	COLUMN B
4. Taxable Income (after Exemptions and Deductions) from Line 35, Form NJ-1040	4.	4.
5. Property Tax Enter in Box 5a the amount from Worksheet F and Deduction line 1. See instructions. Property tax deduction. Enter the amount from Worksheet F, line 2. See instructions.	5.	5. - 0 -
6. New Jersey Taxable Income (Line 4 minus Line 5)	6.	6.
7. Tax on Line 6 amount (From Tax Tables or Tax Rate Schedules)	7.	7.
8. Allowable Credit (Line 3 times Line 7)	8.	8.
9. Credit for Taxes Enter in Box 9a the income or wage tax Paid to Other paid to other jurisdiction during tax year on Jurisdiction income shown on Line 1. See instructions. 9a. _____ Credit allowed. (Enter lesser of Line 8 or Box 9a). (The credit may not exceed your New Jersey tax on Line 38).	9.	9.

- If you are not eligible for a property tax benefit, enter the amount from Line 9, Column B, on Line 40, Form NJ-1040. Make no entry on Lines 36c or 48, Form NJ-1040.
- If you are eligible for a property tax benefit, you must complete Worksheet H to determine whether you receive a greater benefit by claiming a property tax deduction or taking the property tax credit.

Schedule B NET GAINS OR INCOME FROM DISPOSITION OF PROPERTY List the net gains or income, less net loss, derived from the sale, exchange, or other disposition of property including real or personal whether tangible or intangible.

1. a. Kind of property and description	b. Date acquired (Mo., day, yr.)	c. Date sold (Mo., day, yr.)	d. Gross sales price	e. Cost or other basis as adj. (see inst.) and expense of sale	f. Gain or (loss) (d less e)
FED SCH D					11,789.
2. Capital Gains Distributions					69.
3. Other Net Gains					
4. Net Gains (Add Lines 1, 2, and 3) (Enter here and on Line 18. If loss enter ZERO here & make no entry on Line 18) ..					11,858.

Schedule C NET GAIN OR INCOME FROM RENTS, ROYALTIES, PATENTS AND COPYRIGHTS List the net gains or net income, less net loss, derived from or in the form of rents, royalties, patents, and copyrights as reported on your Federal Income Tax Return. If you have passive losses for Federal purposes, see instructions.

1. a. Kind of Property	b. Net Rental Income (Loss)	c. Net Income From Royalties	d. Net Income From Patents	e. Net Income From Copyrights
2. Totals	b.	c.	d.	e.
3. Net Income (Combine Columns b, c, d, and e) (Enter here and on Line 22. If loss enter ZERO here and make no entry on Line 22)				3.

2010 NJ-1040-V PAYMENT VOUCHER

PAYMENT BY CREDIT CARD

You may pay your 2010 New Jersey income taxes or make payment of estimated tax for 2011 by credit card. Pay by phone (1-800-2PAYTAX, toll free) or over the Internet (www.state.nj.us/treasury/taxation) and use a Visa, American Express, MasterCard or Discover/Novus credit card. **Do not use the payment voucher if you pay your taxes by credit card. There is a convenience fee of 2.49% paid directly to Official Payments Corp. based on the amount of your tax payment.**

PAYMENT BY E-CHECK

You may pay your 2010 New Jersey income taxes or make payment of estimated tax for 2011 by e-check. This option is available on the Division's website at:

www.state.nj.us/treasury/taxation/

Taxpayers who do not have access to the Internet can make a payment by calling the Division's Customer Service Call Center at 609-292-6400. **Do not use the payment voucher if you pay your taxes by e-check.**

PAYMENT BY CHECK

If you are paying your 2010 New Jersey income taxes by check, be sure to enclose the payment voucher printed below with your check or money order and enclose it with your return. Mail to: State of New Jersey, Division of Taxation, Revenue Processing Center, PO Box 111, Trenton, NJ 08646-0111.

If you are making your first installment payment of estimated tax for 2011, use separate checks or money orders for each payment. Send your 2011 estimated tax payment with a NJ-1040-ES voucher to: State of New Jersey, Division of Taxation, Revenue Processing Center, PO Box 222, Trenton, NJ 08646-0222.

NJ1040V1

NJ-1040-V **New Jersey Gross Income Tax**
2010 **Payment Voucher**

251-02-0752 STER 252-02-0752
STERLING STEVEN A & PAGE S
3717 MISTY MEADOW
WHARTON NJ 07885-

Make Check Payable to `State of New Jersey - TGI'
Write your Social Security # and tax year on your check

State of New Jersey
Division of Taxation
Revenue Processing Center
PO Box 111
Trenton, NJ 08645-0111

Enter amount of payment here:

\$ 213.00

1045

013022510207520005STER1012060000021300

NJ

Dependents Information

2010

Name: STEVEN A & PAGE S STERLING

SSN: 251-02-0752

First name	MI	Last name	SSN	Birth year
SAMANTHA		SUMMERS	253-02-0752	1949

Department of the Treasury
Internal Revenue Service

- ▶ Do not send to the IRS. This is not a tax return.
- ▶ Keep this form for your records. See instructions.

2010

Declaration Control Number (DCN) ▶ 00200752 1

Taxpayer's name STEVEN A STERLING	Social security number 251-02-0752
Spouse's name PAGE S STERLING	Spouse's social security number 252-02-0752

Part I Tax Return Information-Tax Year Ending December 31, 2010 (Whole Dollars Only)	
1 Adjusted gross income (Form 1040, line 38; Form 1040A, line 22; Form 1040EZ, line 4)	1 57,162.
2 Total tax (Form 1040, line 60; Form 1040A, line 37; Form 1040EZ, line 11)	2 2,243.
3 Federal income tax withheld (Form 1040, line 61; Form 1040A, line 38; Form 1040EZ, line 7)	3 3,444.
4 Refund (Form 1040, line 74a; Form 1040A, line 46a; Form 1040EZ, line 12a; Form 1040-SS, Part I, line 12a)	4 1,201.
5 Amount you owe (Form 1040, line 76; Form 1040A, line 48; Form 1040EZ, line 13)	5

Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of perjury, I declare that I have examined a copy of my electronic individual income tax return and accompanying schedules and statements for the tax year ending December 31, 2010, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from my electronic income tax return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgment of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my Federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. I further understand that this authorization may apply to future Federal tax payments that I direct to be debited through the Electronic Federal Tax Payment System (EFTPS). In order for me to initiate future payments, I request that the IRS send me a personal identification number (PIN) to access EFTPS. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for my electronic income tax return and, if applicable my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

I authorize KINNELON LIBRARY TCE to enter or generate my PIN 12345
ERO firm name **Enter five numbers, but do not enter all zeros**
as my signature on my tax year 2010 electronically filed income tax return.

I will enter my PIN as my signature on my tax year 2010 electronically filed income tax return. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature ▶ _____ Date ▶ 10/15/2011

Spouse's PIN: check one box only

I authorize KINNELON LIBRARY TCE to enter or generate my PIN 12345
ERO firm name **Enter five numbers, but do not enter all zeros**
as my signature on my tax year 2010 electronically filed income tax return.

I will enter my PIN as my signature on my tax year 2010 electronically filed income tax return. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ▶ _____ Date ▶ 10/15/2011

Practitioner PIN Method Returns Only-continue below

Part III Certification and Authentication-Practitioner PIN Method Only

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 20075298765
do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the tax year 2010 electronically filed income tax return for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and **Publication 1345**, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature ▶ S24051405 KINNELON LIBRARY TCE Date ▶ 10/15/2011

ERO Must Retain This Form - See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So